

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

pplication or Docket Number

10/507365

CLAIMS AS FILED - PART I (Column 1) (C						lumn 2)		SMALL ENTITY TYPE			OTHER THAN OF SMALL ENTITY	
TOTAL CLAIMS			100101111		10010		1	RATE	FEE	7	RATE	FEE
rop					NU 18 45	CD EXIBA		BASIC FEI	+	┤	BASIC FEE	
FOR			NUMBER FILED		NUMBER EXTRA			DASIC I E	· · ·	OR	52310 1 02	120
TO	OTAL CHARGE	ABLE CLAIMS	\5 minus 20=		*		.	XS 9=		ÖR	XS18=	
<u> </u>	DEPENDENT C				<u>*</u>			X43=		OR	X86=	
MULTIPLE DEPENDENT CLAIM PRESENT								+145=		OR	-290=	
* If the difference in column 1 is less than zero, enter "0" in column 2							L	TOTAL	1	OR	TOTAL	
CLAIMS AS AMENDED - PART II											OTHER	THAN
		(Column 1)		(Column 2) (Column 3)			SMALL ENTITY			OR	SMALL	ENTITY
AMENDMENT A	·	CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER JUSLY	PRESENT EXTRA		BATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	<del>ir it</del>		=		XS 9=		OR	X\$18=	:
	Independent	*	Minus	***		=		X43= ·		OR	X86=	
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	
								TOTAL	<del> </del>		TOTAL	
(Column 1) (Column 2) (C							A	DDIT. FEE	t	<b>J</b> OI 1	ADDIT. FEE	
AMENDMENT B		(Column 1) CLAIMS		HIĞH	ST	(Column 3)	Г		ADDI-			ADDI-
		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=.		OR	X\$18=	
	inaependent	•	Minus	***		=		X43=		OR:	X86=	
	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT	CLAIM			+145=		OR.	+290=	·
										C L	TOTAL	
ADDII. FEE L												
AMENDMENT C		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Colum HIGHE NUMB PREVIOU PAID F	ST ER USLY	PRESENT EXTRA	Γ	RATE	ADDI- TIONAL FEE	[	RATE	ADDI- TIONAL FEE
	Total		Minus	**		=	上	X\$ 9=		OR	X\$18=	
MEN	Independent	*	Minus	***		=	-		<del></del>		X86=	
₹	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT	CLAIM			X43=	· ·	OR		
	• With a cate in column 1 to long the cate in									OR	+290=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  OR A										TOTAL DDIT. FEE		
		nber Previously Pai ber Previously Paid							ropriate box	in colu	ımn 1.	

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